FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR FORM LIMITED OFFERING EXEMPTION OMB APPROVAL

OMB Number:

3235-0076 April 30, 2008

Expires:

Estimated average burden

hours per response...... 16.00



Name of Offering (check if this is an amendment and name has changed, and indicate change.)							
Offer and Sale of Series 1 Preferred	Stock						
Filing Under (Check box(es) that apply):	Rule 504	☐ Rule 505	□ Rule 506	Section 4(6)	☐ ULOE		
Type of Filing: New Filing	☐ Amendment						
	A.	BASIC IDENTIF	ICATION DATA				
1. Enter the information requested about t	he issuer.						
Name of Issuer (check if this is an ame	ndment and name has o	changed, and indicate	change.)				
Reef Point Systems, Inc.							
Address of Executive Offices		(Number and Street	, City, State, Zip Code)	Telephone Numbe	r (Including Area Code		
8 New England Executive Park, Bu	rlington, MA 01803	<u> </u>		781-505-8300			
Address of Principal Business Operations (if different from Executive Offices)		(Number and Street	, City, State, Zip Code)	Telephone Numbe	r (Including Area Code)		
Brief Description of Business					PROCESSE		
Network security.					MAR 2 7 2003		
Type of Business Organization							
	limited partnersh	nip, already formed	☐ other	(please specify):	/THOMSON		
☐ business trust	limited partnersh	nip, to be formed			JTHOMSON JEINANCIAL		
Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organizati	on: (Enter tw		ervice Abbreviation for		Estimated		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File. U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

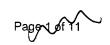
Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.



A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, Diamond, Stephen	if individual)				
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Code)			
c/o Reef Point Systems, In-		· · · · · · · · · · · · · · · · · · ·			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, Baltier, Mark	if individual)				
Business or Residence Addr c/o Reef Point Systems, Inc	•				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, Fisher, Adam	if individual)				
Business or Residence Addr c/o Jersualem Venture Par	,				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, Hadar, Rami	if individual)				
Business or Residence Addr c/o Jersualem Venture Par	`				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner
Full Name (Last name first, Kau, Andy	if individual)				
Business or Residence Addr c/o Walden International I	•	•	Floor, San Francisco, CA	94111	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, Koss, Gregory	if individual)				
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Code)			,
c/o Reef Point Systems, Inc	., 8 New England I	Executive Park, Burlingto	n, MA 01803		
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, 3i Technology Partners, L.	· ·				
Business or Residence Address 890 Winter Street, Suite 16	ess (Number and St				

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· 2. Enter the information requested for th				
Each promoter of the issuer, if the issEach beneficial owner having the portion			more of a class of ea	with securities of the issuer
Each executive officer and director of the second control of				
Each general and managing partner or		9	, , , , , , , , , , , , , , , , , , ,	,
Check Box(es) that Apply: Promote	r 🛛 Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Jerusalem Venture Partners IV, L.P.				
Business or Residence Address (Number at	nd Street, City, State, Zip Code)			
770 Broadway, 2nd Floor, New York, NY				
Check Box(es) that Apply: Promote	r 🛛 Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Pacven Walden Ventures IV, L.P.				
Business or Residence Address (Number an	nd Street, City, State, Zip Code)			
Walden International Investment Group	, 1 California Street, 28th Flo	or, San Francisco, CA 941	111	
Check Box(es) that Apply: Promotes	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Westbury Equity Partners SBIC, L.P.				
Business or Residence Address (Number an				
1400 Old Country Road, Suite 313, West	bury, NY 11590			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number ar	nd Street, City, State, Zip Code)			
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number ar	nd Street, City, State, Zip Code)	***************************************		
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number ar	nd Street, City, State, Zip Code)			
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number an	d Street, City, State, Zip Code)			

					- В. І	NFORMA'	TION ABO	OUT OFFE	RING				
			-									Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										•••••		\boxtimes	
2. What is the minimum investment that will be accepted from any individual?											\$	N/A	
2. That is the minimum investment that will be accepted from any individual:											Yes	No	
3. Does the offering permit joint ownership of a single unit?												\boxtimes	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full N	lame (L	ast name	first, if indiv	/idual)									
Busin	ess or F	Residence	Address (Nu	umber and S	Street, City	, State, Zip	Code)						
Name	of Ass	ociated Br	oker or Dea	ler				***					
			Listed Has										
	k "All ! .L]	States" or [AK]	check indivi [AZ]	iduals State [AR]	s). [CA]	All Stat [CO]	tes [CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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Full N	Iame (L	ast name	first, if indiv	ridual)						·			
Busin	ess or F	Residence	Address (Nu	ımber and S	Street, City	, State, Zip	Code)						
Name	of Ass	ociated Br	oker or Dea	ler							<u></u>		
			Listed Has					· · · · · · · · · · · · · · · · · · ·		71			
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[R	I]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (L	ast name f	irst, if indiv	ridual)			···						
Busine	ess or R	Residence A	Address (Nu	ımber and S	Street, City	, State, Zip	Code)						
Name	of Asso	ociated Bro	oker or Dea	ler			- 1						
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[M	ſT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[R	Π	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt 0.00Equity 0.00 \$ 0.00 Common Convertible Securities (including warrants)..... \$ 31,091,270.00 \$ 12,591,269.13 Partnership Interests... 0.00 \$ 0.00Other (Specify) _____ 0.00 \$ 0.00 Total..... \$ 31,091,270.00 \$ 12,591,269.13 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount **Investors** of Purchase Accredited Investors \$ 12,591,269.13 Non-accredited Investors \$_ 0.00Total (for filings under Rule 504 only)..... 0 \$ 0.00 Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. **Dollar Amount** Type of Type of Offering Security Sold Rule 505 N/A 0.00 Regulation A..... N/A \$ 0.00 Rule 504 N/A \$ 0.00 Total..... 0.00 a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may

be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees..... 0.00 Printing and Engraving Costs П 0.00Legal Fees. \boxtimes 65,000.00 Accounting Fees 0.00Engineering Fees 0.00 \Box Sales Commissions (specify finders' fees separately) 0.00 Other Expenses (identify) 0.00 Total 冈 65,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." \$ 31,026,270.00 Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above. Payments to Officers, Directors, & Payments to Affiliates Others Salaries and fees □ \$ 0.00 🔲 \$ 0.00 Purchase of real estate □ \$ ___ 0.00 🔲 \$ 0.00 Purchase, rental or leasing and installation of machinery and equipment..... □ \$ 0.00 🔲 \$ 0.00 Construction or leasing of plant buildings and facilities...... □ \$ 0.00 🔲 \$ 0.00 Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)..... □ \$ 0.00 🔲 \$ 0.00 Repayment of indebtedness □ \$ ____ 0.00 🔲 \$ 0.00 Working capital □ \$ _____ $0.00 \boxtimes \$31,026,270.00$ □ \$ 0.00 🔲 \$ Other (specify): Column Totals □ \$ 0.00 🛛 \$31,026,270.00

Total Payments Listed (column totals added).....

S 31,026,270.00

	ED					

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature/	Date
Reef Point Systems, Inc.	They Chent	March 1, 2006
Name of Signer (Print or Type)	Title or Signer (Print or Type)	
Stephen Diamond	Chief Executive Officer	

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18. U.S.C. 1001.)